

<b>CLAIMS ONLY</b>							Application Number <b>10/664544</b>		Filing Date	
							Applicant(s)			
<b>5-26-05</b>							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
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Total Indep	1		1		1		1		1	
Total Depend	6		6		6		6		6	
Total Claims	7		7		7		7		7	